PTO/SB/06(12-04)

Approved for the through 1/1 17000 CMB 0411-0032 Under the Peperwork Reduction Act of 1995, no principle and required to respond to a pollection of information under a displayer a yald Child control number. U.S. Peters and Trademark Office; U.S. DEPARTMENT OF COMMERCE Application or Doctor Humber Substitute for Form PTO-875 Effective December 8, 2004 01 APPLICATION AS FILED - PARTI. (Column 1) OTHER THAN · Maining 21 SMALL ENTITY OR SMALL ENTITY FOR HUMBER FILED HUMBER EXTRA BASIC FEE RATE (1) FRE (1) (37 CFR | 18(1) (6) # (6)) RATE (1) EEEM H/A HVA 150.00 SEARCHFEE ŇIA **300**.00 (37 OFA 1 16(W. 14, or 1m) NA . N/A N/A \$250. EXAMINATION FE N/A \$600 (37 CFR 1 1610) (p), or 1911 : NVÀ N/A NX \$100 TOTAL CLAIMS NM \$200 (37.CFR 1 1610) MINUS 20 . X\$ 26 independent claims X\$50 ÓR (37 CFR 1 16(N) C numm X100 X200 If the specification and drawings expeed 100 APPLICATION SIZE sheets of paper, the application size fee due FEE . 137 CFR 116(4) is \$260 (\$126 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(Q) and 37 CFR 1,16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR | 160) +160= +360= * If the difference in column 1 is less than 2010, enler "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3): OTHER THAN OR SMALL ENTITY CLAIMS REMAINING AFTER HIGHEST SMALL ENTITY NUMBER PRESENT RATE (1) (10.6 ADDI-PRÉVIOUSLY RATE(\$) AMENDMENT EXTRA MENDMENT TIONAL ADOI: PAID FOR FEE (1) TIONAL FEE (1) pi cre Lien Minus X\$ 25 X\$50 profesions. Minus OR X100 X200 Application Size Fée (37 CFR 1.16(5)) Oft FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +1B0= +360= OR TOTAL TOTAL. ADO'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST Œ NUMBER PRESENT AFTER. RATE (\$) PREVIOUSLY ADDI-RATE (\$) ADOI-TIONAL EXTRA TIOHAL PAID FOR FEE (1) total corrections Minus X\$ 25 X\$50 OR moibeudeur . Minue X100 X200. Application 6 tre F40 (37 CFR 1.16(8)) OR. furit presentation of multiple dependent claim (at CFR 1.160) +180= +860a OR TOTAL' TOTAL OR

At the entry in column 1 to been than the entry in column 2, write "V in column 3.

If the "Highest Number Previously Paid For" IN THE SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" IN THE SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

E collection of information to required by 37 CFR 1.16. The information is required to obtain or metals a benefit by the public which is to the land by the fine and or previously in the smooth of the collection is estimated to take 12 minutes to complete. It is smoothed that from and/or suppositions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient of the land of the land of the land of the land officer, U.S. Patient of the land officer, U.S. Patient of the land of the l

ADD'L FEE